Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

20

2010

OMB No 1545-0047

Open to Public Inspection

benefit trust or private foundation)

The organization may have to use a copy of this return to satisfy state reporting requirements

		2040				
		2010 calendar year, or tax year beginning 01-01-2010 and ending 12-31-2010 C Name of organization		D Employer i	dentification	number
_		ACTON INSTITUTE FOR THE STUDY OF				
_	tress ch	Doing Business As		38-29268	522	
_	me cha	inge		E Telephone	number	
_ Init	ıal retu	Number and street (or P O box if mail is not delivered to street address)	Room/suite	(616) 454	1-3080	
Ter	mınate	d 161 OTTAWA AVE NW NO 301				
– _{Am}	ended			G Gross receip	its \$ 6,248,393	3
– _{App}	olication	GRAND RAPIDS, MI 495032718 n pending				
		F Name and address of principal officer	U/5)	group return for affili	T., I	
		ROBERT SIRICO	n(a) Isthisa	group return for affili	ates/ Yes	• No
		161 OTTAWA AVENUE NW SUITE 301	H(b) Are all a	iffiliates included	, Г	Yes No
		GRAND RAPIDS, MI 49503	If"No	," attach a list	t (see instri	uctions)
Ta	x-exem	npt status	H(c) Group	exemption n	umber 🟲	
W	ebsite	e: ► WWW ACTON ORG				
(Forr	n of or	ganization ✓ Corporation ☐ Trust ☐ Association ☐ Other ►	L Year of form	nation 1990	M State of leg	al domicile MI
Pa	rt I	Summary		•		
sovellialice		Briefly describe the organization's mission or most significant activities TO PROMOTE A FREE AND VIRTUOUS SOCIETY CHARACTERIZED BY INDI ^V RELIGIOUS PRINCIPLES	VIDUAL LIBE	ERTY AND SU	JSTAINED I	ЗҮ
Ξ						
ž.	_ ·	Charleston box BC state annual and the state of the state		:0/ -£-t		
3		Check this box 🔭 if the organization discontinued its operations or disposed of	more than 25	1	issets I	
Acumines &		Number of voting members of the governing body (Part VI, line 1a)		3		15
<u>s</u>		Number of independent voting members of the governing body (Part VI, line 1b)		4		13
}		Total number of individuals employed in calendar year 2010 (Part V, line 2a) .		5		33
į		Total number of volunteers (estimate if necessary)		6		30
		Total unrelated business revenue from Part VIII, column (C), line 12		7a		0
	b	Net unrelated business taxable income from Form 990-T, line 34		7b		8,257
			Prior		Curren	
g _i	8	Contributions and grants (Part VIII, line 1h)		4,877,260		5,699,792
Revenue	9	Program service revenue (Part VIII, line 2g)		399,591		338,559
34	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	13,523		19,426	
ш.	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		-3,558		12,712
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line		5,286,816		6,070,489
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		304,510		509,448
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0		0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-				
\$	15	10)		1,908,288		2,007,728
Expenses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0		0
충	ь	Total fundraising expenses (Part IX, column (D), line 25) ▶531,973				
ш	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f)		1,795,113		2,563,020
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)		4,007,911		5,080,196
	19	Revenue less expenses Subtract line 18 from line 12		1,278,905		990,293
<u>8</u>			Beginning	of Current	Es. d. 4	
net Assets of Fund Bafances				ar	End of	ı cdi
3 TE	20	Total assets (Part X, line 16)		6,363,086		7,759,757
Z Z	21	Total liabilities (Part X, line 26)		226,374		474,904
Z II	22	Net assets or fund balances Subtract line 21 from line 20		6,136,712		7,284,853
Pai	rt II	Signature Block				
mow		Ities of perjury, I declare that I have examined this return, including accompanying sch and belief, it is true, correct, and complete. Declaration of preparer (other than officer)				
		*****		1-08-12		
Sign Here		Signature of officer ROBERT SIRICO PRESIDENT Type or print name and title	Dat	e		
		Print/Type Preparer's signature Dat	C I	heck if self-	PTIN	
Paid		preparer's name MARGARET W BISHOP MARGARET W BISHOP	e	mployed 🕨 🦳		
zaid Prepa	arer	Firm's name BEENE GARTER LLP			Firm's EIN	<u> </u>
Jse (Firm's address 56 GRANDVILLE AVE SW SUITE 100			Phone no 🕨	(616) 235-
, , , , , (J.11.y	GRAND PARIDS MI 495034036			5200	

May the IRS discuss this return with the preparer shown above? (see instructions)

III Statement of Program Service Accomplishments
Check if Schedule O contains a response to any question in this Part III
Briefly describe the organization's mission
ON OF THE ACTON INSTITUTE IS TO PROMOTE A FREE AND VIRTUOUS SOCIETY CHARACTERIZED BY INDIVIDUAL TY AND SUSTAINED BY RELIGIOUS PRINCIPLES
Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
If "Yes," describe these new services on Schedule O
Did the organization cease conducting, or make significant changes in how it conducts, any program services?
If "Yes," describe these changes on Schedule O
Describe the exempt purpose achievements for each of the organization's three largest program services by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported
(Code) (Expenses \$ 2,076,196 including grants of \$ 389,431) (Revenue \$ 306,350) EDUCATION ACTON'S EDUCATION DEPARTMENT IS AN OUTREACH PROGRAM FOR CURRENT AND FUTURE RELIGIOUS LEADERS, BOTH NATIONALLY AND INTERNATIONALLY, AND WORKS TO PROMOTE AN UNDERSTANDING OF MARKET PRINCIPLES AND TO ENCOURAGE THE ECONOMIC FREEDOM THAT CREATES OPPORTUNITY FOR ALL THE INSTITUTE SPONSORS CONFERENCES AIMED AT EDUCATING RELIGIOUS LEADERS OF ALL DENOMINATIONS AND PROVIDES OPPORTUNITIES FOR AWARDS AND SCHOLARSHIPS THROUGH VARIOUS PROGRAMS OF THE OUTREACH AREA THE INSTITUTE SPONSORED SIX DOMESTIC STUDENT CONFERENCES FOR FUTURE RELIGIOUS LEADERS AND OTHER SHAPERS OF THE MORAL CULTURE THE CONFERENCES INCLUDED THE ACTON UNIVERSITY, WHICH IS AN ANNUAL COMPREHENSIVE FOUR-DAY EXPLORATION OF THE INTELLECTUAL FOUNDATIONS OF A FREE SOCIETY MANY STUDENTS SELECTED TO ATTEND OUR STUDENTS FROM 49 DIFFERENT COUNTRIES ATTENDED, AND LIMITED TRAVEL SCHOLARSHIPS WERE PROVIDED IN CASES OF NEED EXPENSES WERE ALSO INCURRED FOR A DISCOVERY PROCESS TO IDENTIFY AND EDUCATE CLERGY, STUDENTS, RELIGIOUS LEADERS AND SEMINARY FACULTY MEMBERS WHO ASSIST USIN FURTHERING OUR PROGRAMS THE PROGRAMS DEPARTMENT IS ALSO AN INTERNATIONAL EDUCATIONAL RESOURCE DEDICATED TO ADVANCING THE BUSINESS ETHICS MODEL OF ENTREPRENEURIAL STEWARDSHIP, ENCOURAGING AND SUPPORTING BUSINESS LEADERS IN THE ACTIVE INTEGRATION OF INTEGRITY WITH THEIR PROFESSION INTERNATIONALLY, WE HELD FIVE CONFERENCES ON VARIOUS TOPICS INCLUDING CATHOLIC EDUCATION, POVERTY AND DEVELOPMENT, AND INTELLECTUAL PROPERTY RIGHTS, AND A CO-SPONSORED A STUDENT CONFERENCE IN AUSTRIA OUR ROME OFFICE ALSO HELD REGULAR SMALL LECTURES AT THE OFFICE
(Code) (Expenses \$ 525,312 including grants of \$ 76,125) (Revenue \$ 8,290)
RESEARCH THE INSTITUTE'S ACADEMIC INVESTIGATIONS ARE CONDUCTED BY ITS RESEARCH DEPARTMENT. THE WORK PRODUCED BY RESEARCH INCLUDES THE DISCIPLINES OF PHILOSOPHY, ECONOMICS, THEOLOGY, AND HISTORY, AMONG OTHERS, AND IT INCLUDES THE CONTRIBUTIONS OF BOTH IN-HOUSE RESEARCH FELLOWS AND OF INVITED SCHOLARS. ADDITIONALLY, THE INVESTIGATIONS PRODUCED AT THE ACTON INSTITUTE ARE DELIVERED WIDELY AT CONFERENCES WITH THE GOAL OF REACHING THE SCHOLARLY COMMUNITY AT LARGE THE RESEARCH DEPARTMENT PUBLISHES BOOKS, JOURNALS, MONOGRAPHS AND OCCASIONAL PAPERS. THE JOURNAL OF MARKETS & MORALITY IS A SEMI-ANNUAL REFEREED JOURNAL THAT PROVIDES A FORUM FOR SCHOLARS TO ENGAGE IN ISSUES CONCERNING THE MORALITY OF THE MARKETPLACE. THE CHRISTIAN SOCIAL THOUGHT SERIES EXAMINES, IN EACH VOLUME, A KEY ECONOMIC ISSUE FACING THE CHRISTIAN CHURCH. THE ETHICS AND ECONOMICS SERIES PRODUCES BOOKS THAT INTEGRATE NATURAL LAW THEORY AND ECONOMIC THOUGHT THE RESEARCH DEPARTMENT ALSO MANAGES ACTON'S SCHOLARSHIP PROGRAMS. THE ANNUAL NOVAK AWARD RECIPIENT WAS PRESENTED WITH A PRIZE TO ACKNOWLEDGE AND REWARD NEW RESEARCH INTO THE RELATIONSHIP BETWEEN RELIGION, ECONOMIC FREEDOM, AND THE FREE AND VIRTUOUS SOCIETY. FELLOWSHIPS WERE AWARDED TO PROVIDE FINANCIAL ASSISTANCE, IN THE FORM OF ACADEMIC FELLOWSHIPS AND TRAVEL GRANTS, TO PROMISING SEMINARIANS AND GRADUATE STUDENTS WHO ARE ADVANCING AN UNDERSTANDING OF THE CONNECTION BETWEEN ECONOMIC LIBERTY AND RELIGIOUS VALUES.
(Code) (Expenses \$ 851,596 including grants of \$ 43,892) (Revenue \$ 25,734)
MEDIA THE MEDIA DEPARTMENT PROMOTES ACTON'S MESSAGE THROUGH VARIOUS MEDIA PRODUCTS AND OUTLETS, IN ADDITION TO THE ADMINISTRATION OF A HIGHLY SELECTIVE AWARD THE DISTRIBUTION OF OUR FEATURE LENGTH FILMS CONTINUED WITH SCREENINGS IN LOCATIONS ACROSS THE U.S. AND INTERNATIONALLY, INCLUDING TRANSLATION INTO SEVERAL LANGUAGES THE FILMS ARE DESIGNED TO PROVIDE AN INTELLECTUALLY AND EMOTIONALLY PERSUASIVE PLATFORM FOR ACTON THEMES. "CALL OF THE ENTREPRENEUR" AND "BIRTH OF FREEDOM" WERE ALSO SOLD WIDELY THROUGH VARIOUS CHANNELS TWO MULTI-PART VIDEO CURRICULUA "EFFECTIVE STEWARDSHIP" AND "THE BIRTH OF FREEDOM" WERE ALSO SOLD WIDELY THROUGH VARIOUS CHANNELS TWO MULTI-PART VIDEO CURRICULUA "EFFECTIVE STEWARDSHIP" AND "THE BIRTH OF FREEDOM" WERE ALSO SOLD WIDELY THROUGH ZONDERVAN AND DISTRIBUTED IN RETAIL OUTLETS ACROSS THE COUNTRY AS WELL AS ONLINE WORK BEGAN AND PROGRESSED THROUGH 2010 ON THE PRODUCTION OF A DOCUMENTARY AND CURRICULUM ABOUT ENTERPRISE SOLUTIONS TO POVERTY IN THE DEVELOPING WORLD THE PROJECT SEEKS TO PROMOTE A PROPER UNDERSTANDING OF THE HUMAN PERSON AND SOCIETY AND TO ENCOURAGE SOLUTIONS THAT CREATE OPPORTUNITY AND UNLEASH THE ENTREPRENEURIAL SPIRIT THE MEDIA DEPARTMENT MANAGES THE GROWING ACTON WEBSITE WHICH IS USING LEADING TECHNOLOGY TO INTEGRATE TEXT, AUDIO, AND VIDEO CONTENT IN AN EASILY ACCESSIBLE FORMAT FOR WEB VISITORS THE CATHOLIC HIGH SCHOOL HONOR ROLL SELECTS THE BEST 50 CATHOLIC SECONDARY SCHOOLS IN AMERICA THE HONOR ROLL PROVIDES A POWERFUL RESOURCE TO PARENTS AND EDUCATORS BY ACKNOWLEDGING THOSE SCHOOLS THAT BEST MAINTAIN HIGH ACADEMIC STANDARDS, UPHOLD THEIR CATHOLIC IDENTITIES, AND PREPARE STUDENTS TO ACTIVELY ENGAGE THE WORLD BY USING THE POWER OF INCENTIVES AND COMPETITION, THE BEST SCHOOLS ARE HIGHLIGHTED TO INSPIRE IMITATION AND ENCOURAGEMENT AMONG ALL THE SCHOOLS SINCE THE PROGRAM BEGAN IN 2004, MORE THAN 300 MEDIA STORIES HAVE HIGHLIGHTED THE FACT THAT THESE SCHOOLS HAVE EARNED THIS DISTINCTION AND ARE REMAINING FAITHFUL TO THEIR CALLING
R

Total program service expenses▶\$ 4e

(Expenses \$

4d

4,169,740

Other program services (Describe in Schedule O) See also Additional Data for Description

716,636 including grants of \$

53,219)

) (Revenue \$

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instruction)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," complete Schedule C, Part II	4		Νo
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part 1	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		Νο
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? <i>If "Yes," complete Schedule D, Part V</i>	10		No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b	Yes	
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		Νο
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		Νο
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(II)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If</i> " <i>Yes,"</i> complete Schedule F, Parts I and IV	14b	Yes	•
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? If "Yes," complete Schedule F, Parts II and IV	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Parts III and IV.	16	Yes	
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes,"</i> complete Schedule L, Part IV	28b		Νο
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🕏	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Νο
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		No
35	Is any related organization a controlled entity within the meaning of section $512(b)(13)$?	35		No
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 Tyes V No			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm 99 0	(2010)

Part V	Statements	Regarding	Other	IRS Filings	and Tax	Compliance

	Check if Schedule O contains a response to any question in this Part V			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 71			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	20	165	
Ba	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b	Yes	
1 a	4a	Yes		
b	If "Yes," enter the name of the foreign country $ ightharpoons$			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Νo
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
ōa .	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		Νo
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes	
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
	file Form 8282?	7c		Νo
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
	contract?	7e		No
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7f 7g		Νο
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	79 7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
•	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
ь 10	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club			
L1	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
l2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
L3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
b	Enter the amount of reserves the organization is required to maintain by the states			
c	In which the organization is licensed to issue qualified health plans Enter the amount of reserves on hand			
1.4~	Did the organization receive any nayments for indeer tanning services during the tay year?	14-		M o
	Did the organization receive any payments for indoor tanning services during the tax year?	14a 14b		No

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O							. 🗸

Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax vear			
b	Enter the number of voting members included in line 1a, above, who are independent			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any			
	other officer, director, trustee, or key employee?	2		Νο
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Νο
4	4		Νο	
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		Νo
6	Does the organization have members or stockholders?	6	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes	
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
ь	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	9		N o	
Se	organization's mailing address? If "Yes," provide the names and addresses in Schedule O			
Re	venue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		Νo
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?			
		11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions)			
_				
	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
	ection C. Disclosure	130		
	TOTAL OF PROPERTY.			

- 17 List the States with which a copy of this Form 990 is required to be filed►MI
- Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply

Own website 🔽 Another's website 🔽 Upon request

- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization KRIS MAUREN

 161 OTTAWA AVE NW

 CRAND BARDES MI 405033710

GRAND RAPIDS, MI 495032718 (616) 454-3080

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response to any question in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and **current** key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- ◆ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the organ	nization nor any re	lated o	rganı	zatio	on co	mpen	sate	d any current office	er, director, or trust	ee
(A) Name and Title	(B) Average hours		tion (that a	(che		II		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee			from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
(1) REV ROBERT A SIRICO DIRECTOR	50 00	Х		х				178,500	0	2,830
(2) DAVID HUMPHREYS CHAIRMAN	1 00	х		х				0	0	0
(3) FRANK HANNA III VICE CHAIRMAN	1 00	Х		х				0	0	0
(4) DAVID MILROY TREASURER	1 00	х		Х				0	0	0
(5) DR ALEJANDRO CHAFUEN SECRETARY	1 00	х		х				0	0	0
(6) ROBERT COSTELLO DIRECTOR	1 00	х						0	0	0
(7) DR GAYLEN BYKER DIRECTOR	1 00	Х						0	0	0
(8) BARRY CONNER DIRECTOR	1 00	х						0	0	0
(9) JC HUIZENGA DIRECTOR	1 00	Х						0	0	0
(10) SIDNEY JANSMA JR DIRECTOR	1 00	Х						0	0	0
(11) JOHN KENNEDY III DIRECTOR	1 00	Х						0	0	0
(12) KENNETH MURASKI DIRECTOR	1 00	Х						0	0	0
(13) REV REN BROEKHUIZEN DIRECTOR	1 00	х						0	0	0
(14) KRIS MAUREN EXECUTIVE DIRECTOR	50 00	х		х				177,335	0	17,590
(15) JOHN CROWE DIRECTOR	1 00	х						0	0	0
(16) TOM VOGT DIRECTOR OF FINANCE	50 00			х				73,900	0	10,700

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A) Name and Title	(B) A verage hours		() ition that a	(che		II		Rep comp	(D) ortable ensation m the	(E) Reportable compensation from related		(F) Estimated amount of oth compensatio		
		per week (describe hours for related organizations in Schedule O)	Institutional Trustee Individual trustee or director		Officei	Key employee	Highest compensated employee	Former	organız	ration (W- 9-MISC)	organizations (W- 2/1099- MISC)		from s organizat relat organiza	the ion and ed	
				<u> </u>											
						<u> </u>									
1b	Sub-Total				٠.	٠.	٠	 				+			
С	Total from continuation sheets	to Part VII, See	ct ion A				►								
d								<u> </u>		429,735		0		31,120	
2	Total number of individuals (incl \$100,000 in reportable compen	-				ted	above) who	receive	ed more tha	n				
													Yes	No	
3	Did the organization list any for on line 1a? <i>If</i> "Yes," complete Sci					ey e	mploy •	ee, o	r highes • • •	t compens	ated employee • • •	3		No	
4	For any individual listed on line organization and related organiz														
5	Did any person listed on line 1a	receive or accr	ue comi	• oensa	• ation	fror	n anv	• unrel	ated or	· · ·	or individual for	4	Yes		
	services rendered to the organiz										•	5		No	
Se	ection B. Independent Con	tractors													
1	Complete this table for your five \$100,000 of compensation from	highest compe		ndep	ende	ent c	ontra	ctors	that red	eived more	e than				
	· · · · · · · · · · · · · · · · · · ·	(A) me and business ad								Descr	(B) uption of services		(C Comper) nsation	
300 G	WATER MEDIA LLC IENERAL PALMER DRIVE ER LAKE, CO 80133	ne and pasmess da	<u> </u>							MEDIA PROD	•		оот рег	236,593	
	,														

2 Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 in compensation from the organization ► 1

Form 9	•	•					P	age 9	
Part \	VIII	Statement of Reven	ue		(A)	(B)	(C)	(D)	ı
					Total revenue	Related	Unrelated		
						or exempt	business revenue	excluded	
						function		from	
						revenue		tax under	
								sections	
								512,	
								513, or 514	
22	1a	Federated campaigns	1a					314	l
E E	ь	Membership dues	. 1b						
ಕ್ಷ		Fundraising events		129,063					
iii s									
3,3		Related organizations							
<u>:</u>	е	Government grants (contributions)	1e						ļ
돌	f	All other contributions, gifts, grants similar amounts not included above		5,570,729					
Contributions, gifts, grants and other similar amounts	g	Noncash contributions included in li	ines 1a-1f \$	1,630,281					
0 E	h	Total. Add lines 1a-1f			5,699,792				ľ
				Business Code					1
nua	2a	CONFERENCE AND MEETING		900099	271,787	271,787			
₽e	ь			900099	32,498				1
93	с			900099	25,689				1
Program Serwce Revenue	d	SUBSCRIPTIONS		900099	8,290	8,290			
9				900099	295	295			-
E S	f	All other program service re	venue						
Š	g	Total. Add lines 2a-2f			338,559				1
	3	Investment income (includir	ng dıvıdends, ınterest]
		and other similar amounts)			12,765			12,765	
	4	Income from investment of tax-ex							-
	5	Royalties							1
	-	Cross Bonts	(ı) Real	(II) Personal					
	oa b	Gross Rents Less rental							
	_	expenses Rental income							
		or (loss)							
	d	Net rental income or (loss)		1					1
	7a	Gross amount	(ı) Securities 67,320	(II) O ther					
	74	from sales of assets other	0.7525						
		than inventory							
	ь	Less cost or other basis and	60,659						
	c	sales expenses Gain or (loss)	6,661						
	d	Net gain or (loss)		1	6,661			6,661	
<u> </u>		Gross income from fundraisi							1
Other Revenue		(not including							
ě		of contributions reported on	line 1c)						
<u> </u>		See Part IV, line 18							
Ě			a	47,685					
0		Less direct expenses . Net income or (loss) from ful		90,007	-42,322			-42,322	
			ictivities See Part IV, line 19 . a		,			,	ł
				ь					
		Net income or (loss) from ga							
	10a	Gross sales of inventory, les	ss						١
		returns and allowances .	a						
	h	Less cost of goods sold .		71,495 27,238					
		Net income or (loss) from sa		27,238	44,257	44,257			
		Miscellaneous Revenue	·	Business Code					1
	11a	MISCELLANEOUS REVENU	E	900099	10,777	10,777			
	ь	-							1
	c	:							1
	d	All other revenue	.						1
	е	Total. Add lines 11a-11d			10,777				1
			•		10,777				-
	12	Total revenue. See Instructi	ons -		6 070 490	202 502	۱ ,] 22.000	1

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

$\mathbf A$ II other organizations must complete column (A) but are not required to $\mathbf C$	omplete columi	ns (B), (C), and	(D).	
ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	85.176			
Grants and other assistance to individuals in the U.S. See Part IV, line 22				
Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16	299,163	299,163		
Benefits paid to or for members				
Compensation of current officers, directors, trustees, and key employees	460,855	330,081	57,489	73,285
Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
Other salaries and wages	1,250,692	981,316	56,129	213,247
Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	68,024	54,202	4,904	8,918
Other employee benefits	134,382	96,124	7,312	30,946
Payroll taxes	93,775	73,467	3,241	17,067
Fees for services (non-employees) Management				
Legal	18,867	943	17,924	
Accounting	18,440	2,592	15,848	
Lobbying				
Professional fundraising services See Part IV, line 17				
Investment management fees				
Other	730,335	702,863	14,492	12,980
Advertising and promotion	26,767	25,411	762	594
Office expenses	448,123	306,944	50,263	90,916
Information technology				
·	219.783	157.426	48,208	14,149
			· -	24,273
Payments of travel or entertainment expenses for any federal,	233,312	200,211	22/023	21,275
,	446,788	439,895	2,865	4,028
	,	,	,	· · · · · · · · · · · · · · · · · · ·
·	137.898	82.654	42.709	12,535
	137,030	52,651	12,703	12,555
Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)				
HONORARIUMS	147,783	147,083		700
MISCELLANEOUS EXPENSES	70,443	17,719	28,810	23,914
MEALS AND ENTERTAINMENT	44,451	35,331	4,699	4,421
				<u> </u>
	5 080 106	4 160 740	379 492	531,973
	3,080,196	4,109,740	3/8,483	331,973
SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII. Grants and other assistance to governments and organizations in the U S See Part IV, line 21 Grants and other assistance to individuals in the U S See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Other salaries and wages Pension plan contributions (include section 401(k) and section 403(b) employer contributions) Other employee benefits Payroll taxes Fees for services (non-employees) Management Legal Accounting Lobbying Professional fundraising services See Part IV, line 17 Investment management fees Other Advertising and promotion Office expenses Information technology Royalties Occupancy Travel Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings Interest Payments to affiliates Depreciation, depletion, and amortization Insurance Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O) HONORARIUMS MISCELLANEOUS EXPENSES MEALS AND ENTERTAINMENT All other expenses Total functional expenses. Add lines 1 through 24f Joint costs. Check here Total functional expenses. Add lines 1 through 24f Joint costs. Check here Tiffollowing SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a	of include amounts reported on lines 6b, b, b), and 10b of Part VIII. Total expenses Forsits and other assistance to governments and organizations in the U.S. See Part IV, line 21 Grants and other assistance to individuals in the U.S. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, line 21 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, line 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(11) and persons described in section 4958(e)(3)(8) Other salaries and wages Pension plan contributions (include section 401(k) and section 403(b) employer contributions) Other employee benefits 134,332 Payroll taxes Payroll taxes 93,775 Fees for services (non-employees) Management Legal 10,867 Accounting 10,867 Accounting 10,867 Accounting 10,867 Advertising and promotion 26,767 Office expenses 448,123 Information technology Royalites Occupancy 7219,783 Travel Payments of travel or entertainment expenses for any federal, state, or local public officials Conferences, conventions, and meetings 1147,783 MEALS AND ENTERTAINMENT All other expenses Total functional expenses. Add lines 1 through 24f Dint costs. Check here ▶ if following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (8) joint costs from a	to include amounts reported on lines 6b, b, 9b, and 10b of Part VIII. Orants and other assistance to governments and organizations in the U.S. See Part IV, line 21. Grants and other assistance to individuals in the U.S. See Part IV, line 22. Grants and other assistance to individuals in the U.S. See Part IV, line 22. Grants and other assistance to individuals in the U.S. See Part IV, line 23. Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, line 15 and 16. Benefits paid to or for members. Gompensation of current officers, directors, trustees, and key employees. Gompensation of current officers, directors, trustees, and key employees. Gompensation of current officers, directors, trustees, and key employees. Gas defined under section 49.58 (£(3)(8). Other salaries and wages. Other salaries and wages. Pension plan contributions (include section 40.1(k) and section 40.3(b) employer contributions). Other employee benefits. 134,382. 96,124. Payroll taxes. Fees for services (non-employees) Management. Legal. 18,867. 943. Accounting. 18,867. 943. Accounting. 18,867. 943. Accounting. 18,867. 943. Active truing and promotion. 20,767. 25,411. Office expenses. 448,123. 306,944. Information technology. Other expenses. Other. Origination technology. Occupancy. 719,783. Payments of fravel or entertainment expenses for any federal, state, or local public officials. Conferences, conventions, and meetings. All other expenses. Itemize expenses not covered above. (List misscellaneous expenses in the 24f Efrime 24f amount exceeds 10% of line 25c, column (A) amount, list line 24f expenses on Schedule O. (). HONORARIUMS. MISCELLARIOUS EXPENSES. 70,443. All other expenses. Fotal functional expenses. Add lines 1 through 24f. Joint costs. Check here Iv. If following. SO P98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) jeint costs from a	Signate Sig

Pa	rt X	Balance Sheet					
					(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing			21,416	1	9,021
	2	Savings and temporary cash investments			3,345,173	2	3,326,335
	3	Pledges and grants receivable, net			1,233,700	3	2,621,534
	4	Accounts receivable, net			89,481	4	39,740
	5	Receivables from current and former officers, directors, trustees highest compensated employees Complete Part II of	, key e	mployees, and			
		Schedule L				5	
	6	Receivables from other disqualified persons (as defined under sepersons described in section $4958(c)(3)(B)$, and contributing ersponsoring organizations of section $501(c)(9)$ voluntary employ organizations (see instructions)	nploye	rs, and			
\$		Schedule L				6	
ssets	7	Notes and loans receivable, net				7	
⋖	8	Inventories for sale or use			76,371	8	84,395
	9	Prepaid expenses and deferred charges			43,762	9	73,179
	10a	Land, buildings, and equipment cost or other basis <i>Complete Part VI of Schedule D</i>	10a	1,447,575			
	ь	Less accumulated depreciation	10b	1,062,047	474,577	10c	385,528
	11	Investments—publicly traded securities			170,617	11	204,225
	12	Investments—other securities See Part IV, line 11			907,989	12	1,015,800
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11				15	
	16	Total assets. Add lines 1 through 15 (must equal line 34)			6,363,086	16	7,759,757
	17	Accounts payable and accrued expenses .			222,119	17	474,904
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
es	21	Escrow or custodial account liability Complete Part IV of Schedule	eD.			21	
bilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified					
Lia		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties				23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities Complete Part X of Schedule D			4,255	25	0
	26	Total liabilities. Add lines 17 through 25			226,374	26	474,904
Se2		Organizations that follow SFAS 117, check here ► 🔽 and comp through 29, and lines 33 and 34.	let e lir	nes 27			
ä	27	Unrestricted net assets			4,163,498	27	5,591,275
Ba	28	Temporarily restricted net assets			1,973,214	28	1,693,578
Fund Balance	29	Permanently restricted net assets				29	
큪		Organizations that do not follow SFAS 117, check here ► _ and	d comp	olete			
2		lines 30 through 34.					
	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other fu	nds			32	
Net Net	33	Total net assets or fund balances			6,136,712	33	7,284,853
_	34	Total liabilities and net assets/fund balances			6,363,086	34	7,759,757

Ра	Check if Schedule O contains a response to any question in this Part XI			. [고	
1	Total revenue (must equal Part VIII, column (A), line 12)	1		6.0	070,48
2	Total expenses (must equal Part IX, column (A), line 25)	2			080,19
3	Revenue less expenses Subtract line 2 from line 1	3			990,29
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		6,1	136,71
5	Other changes in net assets or fund balances (explain in Schedule O)	5		1	157,84
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		7,2	284,85
Pai	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII			৮	•
				Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		Νο
Ь	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	ın		Yes	
			2c	res	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were on a separate basis, consolidated basis, or both	issuea			
	▼ Separate basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	ne	3a		No
Ь	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	required	3b		

Employer identification number

93493228013821

OMB No 1545-0047

2040

Open to Public Inspection

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

ACTON INSTITUTE FOR THE STUDY OF RELIGION AND LIBERTY Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box) 1 A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public section 170(b)(1)(A)(vi) (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety. Seesection 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h Type I Type II c Type III - Functionally integrated Type III - Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? (i) a person who directly or indirectly controls, either alone or together with persons described in (ii) No and (III) below, the governing body of the the supported organization? 11g(i) (ii) a family member of a person described in (i) above? 11g(ii) (iii) a 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) h Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is the organization col (i) list your gove docume	e ion in ted in rning nt?	organizati col (i) of suppor	Old you notify the organization in col (i) of your support?		on in anized S ?	(vii) A mount of support
		instructions))	Yes	No	Yes	No	Yes	No	
Total									

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1) (A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

S	ection A. Public Support	_			,			
	endar year (or fiscal year beginning in) 🟲	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2	010	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	4,610,609	4,617,966	5,901,396	4,877,260	5	5,699,792	25,707,023
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf							
3	The value of services or facilities furnished by a governmental unit to the organization without charge	0						
4 5	Total. Add lines 1 through 3 The portion of total contributions	4,610,609	4,617,966	5,901,396	4,877,260	5	,699,792	25,707,023
5	by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column							4,992,498
6	(f) Public Support. Subtract line 5							20,714,525
	from line 4							
	ection B. Total Support endar year (or fiscal year	T						
Car	beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 20)10	(f) Total
7	A mounts from line 4	4,610,609	4,617,966	5,901,396	4,877,260	5	,699,792	25,707,023
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar	163,226	222,186	135,399	17,749		12,765	551,325
9	sources Net income from unrelated business activities, whether or not the business is regularly carried on	181,820	152,656	207,999			8,257	550,732
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	27,070	56,959	30,139	35,769		58,462	208,399
11	Total support (Add lines 7 through 10)							27,017,479
12	Gross receipts from related activit	ties, etc (See inst	ructions)	_		12		1,383,035
13	First Five Years If the Form 990 is check this box and stop here	for the organizati	on's first, second	, thırd, fourth, or fı	fth tax year as a) organız	
S	ection C. Computation of Pu	blic Support P	ercentage					
14	Public Support Percentage for 201	.0 (line 6 column ((f) divided by line	11 column (f))		14		76 670 %
15	Public Support Percentage for 200	9 Schedule A , Pa	rt II, lıne 14			15		79 320 %
b	33 1/3% support test—2010. If the and stop here. The organization question 33 1/3% support test—2009. If the box and stop here. The organization 10%-facts-and-circumstances test is 10% or more, and if the organization Part IV how the organization me	ialifies as a public e organization did on qualifies as a pu t— 2010. If the orga ation meets the "fi	ly supported orga not check the box ublicly supported anization did not c acts and circumst	nization k on line 13 or 16 organization check a box on lin cances" test, chec	a, and line 15 is e 13, 16a, or 16 k this box and s t	33 1/3% b and line t op here.	or more, o e 14 Explain	►/✓ check this ►/
b 18	organization 10%-facts-and-circumstances test 15 is 10% or more, and if the organization in Part IV how the organization Private Foundation If the organizationstructions	t— 2009. If the organization meets the "fation	anization did not o e "facts and circu acts and circumst	check a box on lin mstances" test, c ances" test The	e 13, 16a, 16b, o heck this box an organization qua	or 17a ar d stop he lifies as a	nd line ere. a publicly	▶ ┌

Schedule A (Form 990 or 990-EZ) 2010 Page 3 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total ın) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified **b** A mounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning **(e)** 2010 (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (f) Total ın) 9 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b c Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage

15	Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f))	15	
16	Public support percentage from 2009 Schedule A, Part III, line 15	16	
S	ection D. Computation of Investment Income Percentage		
17	Investment income percentage for 2010 (line 10c column (f) divided by line 13 column (f))	17	
18	Investment income percentage from 2009 Schedule A , Part III, line 17	18	

19a 33 1/3% support tests—2010. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

33 1/3% support tests—2009. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Schedule A (Fo	orm 990 or 990-EZ) 2010	Pag
Part IV	Supplemental Information. Supplemental Information. Complete this required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. additional information. (See instructions).	•

Facts And	Circumstances	Test

Schedule A (Form 990 or 990-EZ) 2010

Additional Data

Software ID:

Software Version:

EIN: 38-2926822

Name: ACTON INSTITUTE FOR THE STUDY OF

RELIGION AND LIBERTY

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services

AREAS

(Code) (Expenses \$ 716,636 including grants of \$) (Revenue \$ 53,219)

GENERAL EDUCATION THE INSTITUTE SEEKS TO REACH OUT TO BUSINESS LEADERS, POLICY MAKERS, AND RELIGIOUS AND
COMMUNITY LEADERSHIP GROUPS THROUGH LECTURES AND VARIOUS WRITINGS THE 2010 ANNUAL DINNER WAS HELD TO
PROMOTE OUTREACH AND TO THANK SUPPORTERS FOR THEIR PARTNERSHIP WITH THE INSTITUTE THE DINNER AND
PROGRAM FESTIVITIES INCLUDED AN ADDRESS BY A PROMINENT KEYNOTE SPEAKER ON MATTERS OF INTEREST TO THE
INSTITUTE AND ITS SUPPORTERS THERE WERE NEARLY 600 IN ATTENDANCE AND ADMISSION WAS CHARGED TO DEFRAY
EXPENSES INCURRED THE ACTON LECTURE SERIES HOSTED EIGHT LOCAL LUNCHEONS DURING THE YEAR, WITH AN
AVERAGE ATTENDANCE OF 70 INDIVIDUALS PER LECTURE THE INSTITUTE ALSO SPONSORED SEVERAL OTHER LUNCHEON
AND DINNER EVENTS AROUND THE COUNTRY ACTON INSTITUTE ALSO OPERATES A BOOKSTORE TO PROMOTE AND SELL ITS
OWN PUBLICATIONS. IN ADDITION TO OUTSIDE PUBLICATIONS. RELATED TO OUR MISSION AND PROGRAM OUTREACH

DLN: 93493228015821

OMB No 1545-0047

Open to Public Inspection

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements ► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

► Attach to Form 990. ► See separate instructions.

Name of the organization

TON INSTITUTE FOR THE STUDY OF LIGION AND LIBERTY			_		icion number	
		· · · · Circila · · F. · ·		926822		. E 11
organizations Maintaining Donor Adorganization answered "Yes" to Form 990		ier Similar Fur	ias o	or Accounts	. Complete	יוו נ
organization answered res to form 990	(a) Donor advis	ed funds	(1	b) Funds and o	ther account	· s
Total number at end of year	(u) Donor during	ou runus		5 , 1 and 5 and 6	tiller deceding	
Aggregate contributions to (during year)						
` · · · · · · · · · · · · · · · · · · ·						
Aggregate grants from (during year)						
Aggregate value at end of year						
Did the organization inform all donors and donor advis funds are the organization's property, subject to the o			advis	sed	☐ Yes	ΓN
Did the organization inform all grantees, donors, and d used only for charitable purposes and not for the bene conferring impermissible private benefit	_	-			☐ Yes	ΓN
t II Conservation Easements. Complete If	the organization an	swarad "Vas" to	Form	990 Part IV		
Purpose(s) of conservation easements held by the org			1 01 111	330, Tare 1	7, mic 7.	
Preservation of land for public use (e.g., recreation	` <u> </u>	rapply) reservation of an h	ictoria	ally importan	tly land area	
Protection of natural habitat		reservation of a re			·	
	, ,	reservation or a ce	itilieu	mstoric struc	ture	
Preservation of open space						
Complete lines 2a-2d if the organization held a qualifi	ied conservation contrib	oution in the form o	fa coi	nservation		
easement on the last day of the tax year			Т		- 1 (11)	
Total number of concernation cocoments		<u> </u>	_	Held at the	End of the Y	'ear
Total number of conservation easements		<u> </u>	2a			
Total acreage restricted by conservation easements		⊢	2b			
Number of conservation easements on a certified history	oric structure included i	n (a)	2c			
Number of conservation easements included in (c) acc	quired after 8/17/06		2d			
Number of conservation easements modified, transfer	red, released, extinguis	hed, or terminated	by the	e organization	during	
the taxable year 🗠						
Number of states where property subject to conservat						
Does the organization have a written policy regarding enforcement of the conservation easements it holds?	the periodic monitoring,	inspection, handli	ng of	violations, and	│ │ Yes	ΓN
Staff and volunteer hours devoted to monitoring, inspe	ecting and enforcing con	servation easemer	nts du	rıng the year l	<u> </u>	
A mount of expenses incurred in monitoring, inspecting	g, and enforcing conserv	ation easements o	lurıng	the year 🟲 🕏		
Does each conservation easement reported on line 2($170(h)(4)(B)(i)$ and $170(h)(4)(B)(ii)$?	d) above satisfy the req	uirements of section	on		☐ Yes	<u>г</u> м
In Part XIV, describe how the organization reports con balance sheet, and include, if applicable, the text of th the organization's accounting for conservation easeme	e footnote to the organi		•			
Complete if the organization answered "\			r Oth	er Similar	Assets.	
If the organization elected, as permitted under SFAS 1 art, historical treasures, or other similar assets held fo provide, in Part XIV, the text of the footnote to its fina	or public exhibition, edu	cation or research	ın fur			
If the organization elected, as permitted under SFAS 1 historical treasures, or other similar assets held for purprovide the following amounts relating to these items					•	
(i) Revenues included in Form 990, Part VIII, line 1				► \$		
(ii) Assets included in Form 990, Part X				► \$		
If the organization received or held works of art, historical following amounts required to be reported under SFAS	•		fınanc	ıal gaın, provi		
Revenues included in Form 990, Part VIII, line 1	<u>,</u>			► \$		
aco meradea mironi sso, i dit viii, ille i				- + <u> </u>		

Assets included in Form 990, Part X

Part	IIII Organizations Maintaining Co	Hections of Art	t, HIS	tori	<u>cai ir</u>	easu	163, 01 0				LS (CC	munu e a)
3	Using the organization's accession and othe items (check all that apply)	r records, check an	y of th	ne fol	owing	that are	e a significa	nt u	se of its c	ollectior	ו	
а	Public exhibition		d	Γ	Loan	orexch	ange progr	ams				
b	Scholarly research		e	Γ	Other	-						
c	Preservation for future generations											
4	Provide a description of the organization's co	ollections and expla	ain hov	w the	y furthe	er the o	rganızatıon	's ex	empt purp	ose in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t			,					ıılar	Г	Yes	┌ No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an an						answere	d "Y	es" to Fo	rm 990),	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ıan or other ınterm	ediary	for c	ontribu	itions o	r other ass	ets r	not	Г	Yes	☐ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the	follow	/ıng t	able		Г	1		A mou	ınt	
c	Beginning balance							1c				
d	Additions during the year							1d				
e	Distributions during the year							1e				
f	Ending balance						-	1f				
2a	Did the organization include an amount on Fo	orm 990 Part V lin	ر 2010 م				L				Yes	┌ No
			~ Z I '							ı		, 140
Par	If "Yes," explain the arrangement in Part XIV t V Endowment Funds. Complete i		n ans	Wer.	ad "Va	s" to F	orm gan	Dar	t IV lina	10		
F (4)	Endownient i unus. Complete i	(a)Current Year		Prior			Years Back		Three Years		Four Y	ears Back
1a	Beginning of year balance	, ,										
ь	Contributions											
c	Investment earnings or losses											
d	Grants or scholarships											
e	Other expenditures for facilities and programs											
f	Administrative expenses											
g	End of year balance											
2	Provide the estimated percentage of the yea	r end balance held	as					•				
а	Board designated or quasi-endowment											
ь	Permanent endowment ►											
c 3a	Term endowment ► Are there endowment funds not in the posses	ssion of the organiz	ation	that :	are held	d and a	dministered	for	the			
Ju	organization by		3.1011			a unu di		01			Yes	No
	(i) unrelated organizations									3a(i)		
	(ii) related organizations									3a(ii)		
ь	If "Yes" to $3a(II)$, are the related organizatio	•						•		3b		
		· ·	d	+ f.								
4	Describe in Part XIV the intended uses of th					00 5						
4	Describe in Part XIV the intended uses of the VI Investments—Land, Buildings			ee F	orm 9	•	1					
4				ee F		r other	(b)Cost or c	ther	(c) Accun		(d) Bo	ook value
4 Par	t VI Investments—Land, Buildings			ee F	orm 9	r other	(b)Cost or o	ther			(d) Bo	ook value
4 Par 1a l	Description of investment			ee F	orm 9	r other	(b)Cost or o	ther			(d) Bo	ook value
Par la l	Description of investment			ee F	orm 9	r other	(b)Cost or c basis (other	ther	depreci		(d) Bo	
Par 1a l b i	Description of investment and			ee F	orm 9	r other	(b)Cost or c basis (other	other er)	depreci	ation	(d) Bo	133,114 95,387
1a l b i c l d i	Description of investment and			ee F	orm 9	r other	(b)Cost or c basis (other	other er)	depreci	337,419	(d) Bo	133,114

Investments—Other Securities. See	Form 990, Part X, line 12	
(a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)		Cost or end-of-year market value
(1)Financial derivatives		
(2)Closely-held equity interests		
(3)0 ther		
(A) COMMON STOCK OF PRIVATELY HELD	1 01 5 000	_
CORPORATION	1,015,800	F
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	1,015,800	
	, ,	2
Part VIII Investments—Program Related. Se	e Form 990, Part X, line 1	
(a) Description of investment type	(b) Book value	(c) Method of valuation
		Cost or end-of-year market value
	-	
Table (Calume (II) should a sure I form 2000, Book V, and (IV) has 42.)	•	
Total (committee of the committee of the	na 1F	
Part IX Other Assets. See Form 990, Part X, In		
Total (committee of the committee of the		(b) Book value
Part IX Other Assets. See Form 990, Part X, In		(b) Book value
Part IX Other Assets. See Form 990, Part X, In		(b) Book value
Part IX Other Assets. See Form 990, Part X, In		(b) Book value
Part IX Other Assets. See Form 990, Part X, In		(b) Book value
Part IX Other Assets. See Form 990, Part X, In		(b) Book value
Part IX Other Assets. See Form 990, Part X, In		(b) Book value
Part IX Other Assets. See Form 990, Part X, In		(b) Book value
Part IX Other Assets. See Form 990, Part X, In		(b) Book value
Part IX Other Assets. See Form 990, Part X, In		(b) Book value
Part IX Other Assets. See Form 990, Part X, In		(b) Book value
Part IX Other Assets. See Form 990, Part X, In		(b) Book value
Part IX Other Assets. See Form 990, Part X, In		(b) Book value
Part IX Other Assets. See Form 990, Part X, In		(b) Book value
Part IX Other Assets. See Form 990, Part X, In		(b) Book value
Part IX Other Assets. See Form 990, Part X, In		(b) Book value
Part IX Other Assets. See Form 990, Part X, In		(b) Book value
Part IX Other Assets. See Form 990, Part X, II (a) Descri	ption	
Part IX Other Assets. See Form 990, Part X, In (a) Described to the second seco	ption	(b) Book value
Part IX Other Assets. See Form 990, Part X, In (a) Described to the part X other Liabilities. See Form 990, Part X, col.(B) line	15.)	
Part IX Other Assets. See Form 990, Part X, In (a) Described to the second seco	ption	
Part IX Other Assets. See Form 990, Part X, In (a) Described to the second seco	15.)	
Part IX Other Assets. See Form 990, Part X, In (a) Described to the part X other Liabilities. See Form 990, Part X, col.(B) line	15.)	
Part IX Other Assets. See Form 990, Part X, In (a) Described to the second seco	15.)	
Part IX Other Assets. See Form 990, Part X, In (a) Described to the second seco	15.)	
Part IX Other Assets. See Form 990, Part X, In (a) Described to the second seco	15.)	
Part IX Other Assets. See Form 990, Part X, In (a) Described to the second seco	15.)	
Part IX Other Assets. See Form 990, Part X, In (a) Described to the second seco	15.)	
Part IX Other Assets. See Form 990, Part X, In (a) Described to the second seco	15.)	
Part IX Other Assets. See Form 990, Part X, In (a) Described to the second seco	15.)	
Part IX Other Assets. See Form 990, Part X, In (a) Described to the second seco	15.)	
Part IX Other Assets. See Form 990, Part X, In (a) Described to the second seco	15.)	
Part IX Other Assets. See Form 990, Part X, In (a) Described to the second seco	15.)	
Part IX Other Assets. See Form 990, Part X, In (a) Described to the second seco	15.)	
Part IX Other Assets. See Form 990, Part X, In (a) Described to the second seco	15.)	
Part IX Other Assets. See Form 990, Part X, In (a) Described to the second seco	15.)	
Part IX Other Assets. See Form 990, Part X, In (a) Described to the second seco	15.)	
Part IX Other Assets. See Form 990, Part X, In (a) Described to the second seco	15.)	
Part IX Other Assets. See Form 990, Part X, In (a) Described to the second seco	15.)	
Part IX Other Assets. See Form 990, Part X, In (a) Described to the second seco	15.)	

Total revenue (Form 990, Part VIII, column (A), line 12)

6,070,489

1

2	Total expenses (Form 990, Part IX, column (A), line 25)	2	5,080,196
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	990,293
4	Net unrealized gains (losses) on investments	4	157,848
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	157,848
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	1,148,141
Par	t XIII Reconciliation of Revenue per Audited Financial Statements With Revenue	per R	
1	Total revenue, gains, and other support per audited financial statements	1	6,236,465
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities 2b 8,128		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d		
e	Add lines 2a through 2d	2e	165,976
3	Subtract line 2e from line 1	3	6,070,489
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV) 4b		
c	Add lines 4a and 4b	4c	0
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	6,070,489
Part	Reconciliation of Expenses per Audited Financial Statements With Expense	s per	
1	Total expenses and losses per audited financial statements	1	5,088,324
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	-	
a	Donated services and use of facilities		
ь	Prior year adjustments	1	
с	Other losses	1	
d	Other (Describe in Part XIV) 2d	1	
e	Add lines 2a through 2d	2e	8,128
3	Subtract line 2e from line 1	3	5,080,196
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV) 4b	1	
с	Add lines 4a and 4b	4c	0
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	5,080,196
Par	t XIV Supplemental Information	•	•

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Ident if ier	Return Reference	Explanation
		THE INTERNAL REVENUE SERVICE HAS DETERMINED THE
		INSTITUTE IS EXEMPT FROM FEDERAL INCOME TAXES
		UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE
		CODE (THE CODE) IN ADDITION, THE INSTITUTE
		QUALIFIES FOR THE CHARITABLE CONTRIBUTION
		DEDUCTION UNDER SECTION 170(B)(1)(A) AND HAS BEEN
		CLASSIFIED AS AN ORGANIZATION THAT IS NOT A
		PRIVATE FOUNDATION UNDER SECTION 509(A)(2) THE
		INSTITUTE IS SUBJECT TO TAX ON UNRELATED BUSINESS
		INCOME, AS DEFINED BY SECTION 509(A)(1) OF THE
		CODE TAX POSITIONS TAKEN ARE ASSESSED FOR
		UNCERTAINTY AND A PROVISION MAY BE RECORDED IF A
		TAX POSITION IS NOT LIKELY TO BE SUSTAINED UPON
		EXAMINATION WITH LIMITED EXCEPTIONS, THE
		INSTITUTE IS NO LONGER SUBJECT TO AUDITS BY
		FEDERAL AUTHORITIES FOR YEARS PRIOR TO 2007, AND
		STATE AUTHORITIES FOR YEARS PRIOR TO 2006

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As Filed Data -

DLN: 93493228015821

OMB No 1545-0047

Open to Public **Inspection**

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

to Part I

c Totals (add lines 3a and 3b)

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

Statement of Activities Outside the United States

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization

Employer identification number

CT	ON INSTITUTE FOR THE STUDY	/ O E					
	GION AND LIBERTY	I OF				38-2926822	
	rt I General Informatio "Yes" to Form 990, Pa			he United States. C	omplete		ation answered
	For grantmakers. Does the dassistance, the grantees' eligible the grants or assistance?	organization m	naıntaın record grants or assıs	stance, and the select	ion critei	rıa used to awa	
	For grant makers. Describe in Pa United States	irt V the organiz	atıon's procedui	res for monitoring the us	e of grant	funds outside th	e
	Activites per Region (Use Part '	V ıfaddıtıonal s	pace is needed)			
	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region or independent contractors	region (by type) (e g ,	program spe	ity listed in (d) is a service, describe cific type of e(s) in region	(f) Total expenditures for region/investments in region
	EUROPE	1		PROGRAM SERVICES AND GRANTS	EDUCAT	ION	169,7
	Sub-total Total from continuation sheets		0				169,7
	r rotal nom continuation sneets	1	i	1	1		

0

169,741

a) Name of rganization	(b) IRS code section and EIN (if	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method valuation (book, FMV
	applicable)	SOUTH AMERICA	THE ACTON INSTITUTE HAS ESTABLISHED RELATIONSHIPS WITH SEVERAL INTERNATIONAL AFFILIATE ORGANIZATIONS THAT SHARE OUR MISSION AND SEEK TO PROMOTE IDEAS OF THE ACTON INSTITUTE THE AFFILIATES ARE INDEPENDENT ORGANIZATIONS THAT WORK WITH ACTON TO PROMOTE THE IDEAS OF A FREE AND VIRTUOUS SOCIETY IN THEIR OWN COUNTRIES AND WITHIN THEIR OWN CULTURAL CONTEXT ACTON PROVIDES THESE AFFILIATES WITH SMALL GRANTS FOR CONFERENCES, PUBLICATIONS, WEBSITE	76,000	WIRE TRANSFER			appraisal, ot
			WEBSITE MAINTENANCE, TRANSLATION, AND OTHER ACTIVITIES					
		EUROPE	THE ACTON INSTITUTE HAS ESTABLISHED RELATIONSHIPS WITH SEVERAL INTERNATIONAL AFFILIATE ORGANIZATIONS THAT SHARE OUR MISSION AND SEEK TO PROMOTE IDEAS OF THE ACTON INSTITUTE THE AFFILIATES ARE INDEPENDENT ORGANIZATIONS THAT WORK WITH ACTON TO PROMOTE THE IDEAS OF A FREE AND VIRTUOUS SOCIETY IN THEIR OWN COUNTRIES AND WITHIN THEIR OWN COUNTRIES AND WITHIN THEIR OWN COUNTRIES AND WITHIN THEIR OWN COUNTRIES AFFILIATES WITH SMALL GRANTS FOR CONFERENCES, PUBLICATIONS, WEBSITE MAINTENANCE, TRANSLATION, AND OTHER ACTIVITIES	12,000	WIRE TRANSFER			

a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, othe
NOVAK AWARD - ACKNOWLEDGES AND REWARDS OUTSTANDING NEW RESEARCH INTO THE INTERRELATION OF RELIGION AND ECONOMIC LIBERTY	EUROPE	1	10,000	CHECK			uppraiser, etne

Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)	Γ	Yes	✓	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)	Γ	Yes	굣	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)	Γ	Yes	r	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)	Г	Yes	r	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)	Г	Yes	্	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).	Г	Yes	⊽	Νo

Schedule F (Form 990) 2010

Part V	Supplemental	Information
	Cappicinicital	11110111141011

Complete this part to provide the information (see instructions) required in Part I, line 2, and any additional information

information.	•	
Identifier	ReturnReference	Explanation
PROCEDURE FOR MONITORING GRANTS OUTSIDE THE U S		SCHEDULE F, PART I, LINE 2 GRANTS FUNDS ARE MONITORED VIA REPORTS THAT ARE SUBMITTED BY RECIPIENTS ALSO, SOME GRANTS ARE USED FOR ATTENDING ACTON EVENTS
		Schedule F (Form 990) 2010

DLN: 93493228015821

OMB No 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding **Fundraising or Gaming Activities**

Complete if the organization answered "Yes" to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. Attach to Form 990 or Form 990-EZ. See separate instructions.

Name of the organization ACTON INSTITUTE FOR THE STUDY OF **Employer identification number**

38-2926822

REL	IGION AND LIBERTY					38-2926822	
Pa	rt I Fundraising Ac	tivities. Complet	te if the o	organiza	tion answered "Yes"	to Form 990, Part IV	, line 17.
1	Indicate whether the orga	nızatıon raısed funds	through a	any of the	following activities Ch	eck all that apply	
а	Mail solicitations			e	☐ Solicitation of no	n-government grants	
b	Internet and e-mail so	olicitations		f	☐ Solicitation of go	vernment grants	
c	Phone solicitations			g	☐ Special fundraisi	ng events	
d	In-person solicitation	s					
2a	Did the organization have or key employees listed in			•			Г _{Yes} Г №
b	If "Yes," list the ten highe to be compensated at leas						
	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	fundrais custo cont	Did ser have ody or rol of utions?	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
			Yes	No			
Tota	al						

List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

Pa	t II	Fundraising Events. Com more than \$15,000 on Form				
			(a) Event #1 ANNUAL DINNER (event type)	(b) Event #2 (event type)	(c) O ther Events (total number)	(d) Total Events (Add col (a) through col (c))
₽	1	Gross receipts	176,748	3		176,748
Revenue	2	Less Charitable	129,063	3		129,063
<u>~</u>	3	Gross income (line 1 minus line 2)	47,685	5		47,685
	4	Cash prizes				
ın.	5	Non-cash prizes				
esu:	6	Rent/facility costs				
Expenses	7	Food and beverages	60,243	3		60,243
Direct	8	Entertainment				
ā	9	Other direct expenses .	29,764	1		29,764
	10	Direct expense summary Add lin	es 4 through 9 ın column	(d)		90,007
	11	Net income summary Combine li	nes 3 and 10 in column (d)		-42,322
Par	t III	Gaming. Complete if the or \$15,000 on Form 990-EZ, lir		"Yes" to Form 990, Pa	irt IV, line 19, or rep	orted more than
Reveitue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) O ther gaming	(d) Total gaming (Add col (a) through col (c))
	1	Gross revenue				+
Ses	2	Cash prizes				
Expenses	3	Non-cash prizes				
	4	Rent/facility costs				
Direct	5	Other direct expenses				
	6	Volunteer labor	Γ Yes % Γ No	┌ Yes % ┌ No	┌ Yes %	
		Direct expense summary Add lines		•		
	8	Net gaming income summary Com	bine lines 1 and 7 in colu	ımn (d)	<u> F</u>	
9 a b	Is t	er the state(s) in which the organiza he organization licensed to operate No," Explain	gaming activities in eac			· · Fyes FNo
10a b		re any of the organization's gaming Yes," Explain			the tax year?	· · Fyes Fno

revenue?	11	Does the organization operate ga	aming activities with nonmembers? .		┌ _{Yes} ┌ _{No}
Indicate the percentage of gaming activity operated in a The organization's facility An outside facility Interpretation is facility Address Name Address Does the organization have a contract with a third party from whom the organization's gaming/special events books and records Name Address Does the organization have a contract with a third party from whom the organization receives gaming revenue? If "Yes," enter the amount of gaming revenue received by the organization \$ \$	L2	Is the organization a grantor, ber	neficiary or trustee of a trust or a mem	ber of a partnership or other entity	
a The organization's facility		formed to administer charitable g	gaming?		┌ _{Yes} ┌ _{No}
An outside facility	L3	Indicate the percentage of gamir	ng activity operated in		
Name ► Address ► LSa Does the organization have a contract with a third party from whom the organization receives gaming revenue?	а	The organization's facility		13a	
Address ► Address ► Address ► Does the organization have a contract with a third party from whom the organization receives gaming revenue? If "Yes," enter the amount of gaming revenue received by the organization ►\$ and the amount of gaming revenue retained by the third party ►\$ and the amount of gaming revenue retained by the third party ►\$ and the amount of gaming revenue retained by the third party ►\$ and the amount of gaming revenue retained by the third party ►\$ and the amount of gaming revenue retained by the third party ►\$ and the amount of gaming revenue retained by the third party ►\$ and the amount of gaming manager information Name ► Gaming manager compensation ►\$ Description of services provided ► Director/officer	b	An outside facility		13b	
Address ► Address ► Address ► Does the organization have a contract with a third party from whom the organization receives gaming revenue?	14		fthe person who prepares the organiza	tion's gaming/special events books and	
Address ► 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?		records			
Does the organization have a contract with a third party from whom the organization receives gaming revenue?		Name 🟲			
revenue?		Address 🟲			
b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$ and the amount of gaming revenue retained by the third party ▶ \$ and the amount of gaming and address Name ▶ Address ▶ Address ▶ Gaming manager information Name ▶ Gaming manager compensation ▶ \$ Description of services provided ▶ Independent contractor 17 Mandatory distributions a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	15a	Does the organization have a cor	ntract with a third party from whom the	organization receives gaming	
amount of gaming revenue retained by the third party \(\) \\$ C If "Yes," enter name and address Name \(\) Address \(\) Address \(\) Gaming manager information Name \(\) Gaming manager compensation \(\) \\$ Description of services provided \(\) Director/officer \(\) Employee \(\) Independent contractor 17 Mandatory distributions a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? \(\) \(\) \(\) \(\) \(\) Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \(\) \\$ Part IV Complete this part to provide additional information for responses to question on Schedule G (see instructions.)		revenue?			┌ _{Yes} ┌ _{No}
Address ► Address ► Address ► Gaming manager information Name ► Gaming manager compensation ► \$ Description of services provided ► Director/officer	b				
Address ► Address ► Address ► Gaming manager information Name ► Gaming manager compensation ► \$ Description of services provided ► Director/officer	_				
Address Gaming manager information Name Gaming manager compensation \$ Description of services provided Director/officer Employee Independent contractor Mandatory distributions a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		ir yes, entername and address	5		
Name Gaming manager compensation \$ Director/officer		Name 🟲			
Name Gaming manager compensation \$ Director/officer					
Name Gaming manager compensation \$ Director/officer		Address 🟲			
Name ► Gaming manager compensation ► \$ Description of services provided ► Director/officer					
Gaming manager compensation ► \$ Description of services provided ► Director/officer	16	Gaming manager information			
Description of services provided ► Director/officer					
Gaming manager compensation ► \$ Description of services provided ► Director/officer		N b			
Director/officer Employee Independent contractor Mandatory distributions a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		Name F			
Director/officer Employee Independent contractor Mandatory distributions a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		Gaming manager compensation	\$		
If the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		Description of services provided	•		
If the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		F	- .		
a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		,	I Employee	I Independent contractor	
retain the state gaming license?		•	er state law to make charitable distribi	itions from the gaming proceeds to	
b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ Part IV Complete this part to provide additional information for responses to question on Schedule G (see instructions.)	4				
In the organization's own exempt activities during the tax year ► \$ Part IV Complete this part to provide additional information for responses to question on Schedule G (see instructions.)	b	<u> </u>			res I No
instructions.)	-				
	Par	t IV Complete this part to p		responses to question on Schedule G (se	ee
		•	ReturnReference	Evalanation	

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DLN: 93493228015821

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Schedule I

(Form 990)

Grants and Other Assistance to Organizations, Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22. Attach to Form 990

Open to Public **Inspection** Employer identification number

Name of the organization	Employer identification number						
ACTON INSTITUTE FOR THE S RELIGION AND LIBERTY	TODY OF					38-2926822	
Part I General Inform	ation on Grants	and Assistance				•	
 Does the organization main the selection criteria used Describe in Part IV the org 	to award the grants	orassistance?					▼ Yes
	, line 21 for any	o Governments and recipient that received eded	d more than \$5,000	. Check this box if		eived more than \$5,	
1 (a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) DONOR'S TRUSTPO BOX 1305 109 N HENRY ST ALEXANDRIA, VA 22313	52-2166327		83,700				CHARITABLE CONTRIBUTION FOR PURPOSES DEEMED NECESSARY BY THE RECIPIENT
2 Enter total number of sections 3 Enter total number of other							

Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, P	art IV, line 22.
	Use Schedule I-1 (Form 990) if additional space is needed.	

(a)Type of grant or assistance	(b)Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

Ident if ier	Return Reference	Explanation
OTHER INFORMATION	PART IV	SCHEDULE I, PART I, LINE 2 GRANT FUNDS ARE MONITORED VIA REPORTS SUBMITTED BY RECIPIENTS SOME
		GRANTS ARE USED FOR ATTENDING ACTON EVENTS

DLN: 93493228015821

OMB No 1545-0047

Open to Public

Inspection

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

Compensation Information

► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Name of the organization ACTON INSTITUTE FOR THE STUDY OF RELIGION AND LIBERTY

Employer identification number

38-2926822

Pai	rt I Questions Regarding Compensation	on				
					Yes	Νο
1a	Check the appropriate box(es) if the organization p 990, Part VII, Section A, line 1a Complete Part I		ny of the following to or for a person listed in Form vide any relevant information regarding these items			
	First-class or charter travel	Г	Housing allowance or residence for personal use			
	Travel for companions	Г	Payments for business use of personal residence			
	Tax idemnification and gross-up payments	굣	Health or social club dues or initiation fees			
	Discretionary spending account	Γ	Personal services (e g , maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the reimbursement orprovision of all the expenses des			1b	Yes	
2	Did the organization require substantiation prior to officers, directors, trustees, and the CEO/Executiv			2	Yes	
3	Indicate which, if any, of the following the organiza organization's CEO/Executive Director Check all					
	Compensation committee	Г	Written employment contract			
	Independent compensation consultant	모	Compensation survey or study			
	Form 990 of other organizations		Approval by the board or compensation committee			
4	During the year, did any person listed in Form 990 or a related organization), Part VII	I, Section A, line ${f 1a}$ with respect to the filing organization			
а	Receive a severance payment or change-of-contro	ol paymer	nt from the organization or a related organization?	4a		Νo
ь	Participate in, or receive payment from, a supplem	nental non	qualified retirement plan?	4b		Νο
c	Participate in, or receive payment from, an equity-	-based co	mpensation arrangement?	4c		Νο
	If "Yes" to any of lines 4a-c, list the persons and p	provide th	ne applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only n	must comp	plete lines 5-9.			
5	For persons listed in form 990, Part VII, Section A compensation contingent on the revenues of	A, line 1a,	, did the organization pay or accrue any			
а	The organization?			5a		Νo
b	Any related organization?			5b		Νo
	If "Yes," to line 5a or 5b, describe in Part III					
6	For persons listed in form 990, Part VII, Section A compensation contingent on the net earnings of	A, line 1a,	, did the organization pay or accrue any			
а	The organization?			6a		No
Ь	Any related organization?			6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III					
7	For persons listed in Form 990, Part VII, Section payments not described in lines 5 and 67 If "Yes,"			7		Νο
8	Were any amounts reported in Form 990, Part VII subject to the initial contract exception described					
	ın Part III			8		Νo
9	If "Yes" to line 8, did the organization also follow t section 53 4958-6(c)?	the rebutt	able presumption procedure described in Regulations	9		

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of	W-2 and/or 1099-MI		(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
(1) REV ROBERT A SIRICO	(1) (11)	178,500 0	0	0	2,000 0	830 0		
	(ı) (ıı)	177,335 0	0	0	2,000	15,590 0	194,925 0	0
(3)								
(4)								
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Ident if ier	Return Reference	Explanation

Schedule J (Form 990) 2010

NonCash Contributions

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

SCHEDULE M

(Form 990)

▶Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

Name of the organization ACTON INSTITUTE FOR THE STUDY OF

Employer identification number

RELIG	ION AND LIBERTY				38-2926822			
Pa	rt I Types of Property							
		(a) Check if applicable	(b) Number of Contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	(d) Method of determining of amounts		contribut	ion:
1	Art—Works of art	Х	1	_	FAIR MARKET VAL	UE		
2	Art—Historical treasures			·				
3	Art—Fractional interests							
4	Books and publications							
5	Clothing and household	V		26.025				
good		X		36,825	FAIR MARKET VAL	<u>U E</u>		
	Cars and other vehicles .							
	Boats and planes							
	Intellectual property							
	Securities—Publicly traded	Х	10	360,866	FAIR MARKET VAL	<u>U E</u>		
	Securities—Closely held stock							
11	Securities—Partnership, LLC, or trust interests .							
12	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .	Х	1	1,050,000	APPRAISAL			
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts .							
25	Other ► (<u>JEWELRY</u>) COIN	X	1	68,646	FAIR MARKET VAL	UE		
26	Other \blacktriangleright (COLLECTIONS)	Х	1	44,744	FAIR MARKET VAL	UE		
27	Other ►()							
28	Other ► ()							
29	Number of Forms 8283 received by for which the organization complete	-	= -		29			
							Yes	No
30a	During the year, did the organization	n receiv	e by contribution any prope	rty reported in Part I, lines	1-28 that it			
	must hold for at least three years f			•	d to be used			
	for exempt purposes for the entire	holding p	eriod?			30a	\sqcup	No
b	If "Yes," describe the arrangement	: in Part I	Ι			1		
31	Does the organization have a gift a	cceptano	ce policy that requires the r	eview of any non-standard	contributions?	31	Yes	
32a	Does the organization hire or use t contributions?	•	•	to solicit, process, or sell	non-cash	32a	Yes	
ь	If "Yes," describe in Part II							
	If the organization did not report re	venuesı	n column (c) for a type of p	roperty for which column (a) is checked,	1		
	describe in Part II			·	•	1		

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Ident if ier	Return Reference	Explanation
THIRD PARTY USE	,	THE ORGANIZATION RECEIVED A BEQUEST CONSISTING OF ARTWORK, JEWELRY, COINS AND OTHER HOUSEHOLD ITEMS THE ITEMS WERE SOLD AT AN AUCTION BY A THIRD PARTY

Schedule M (Form 990) 2010

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2010

Open to Public Inspection

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

Name of the organization ACTON INSTITUTE FOR THE STUDY OF RELIGION AND LIBERTY Employer identification number

38-2926822

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6		THE ORGANIZATION HAS MEMBERS WHO MAY ELECT ONE OR MORE MEMBERS OF THE GOVERNING BODY, THE BOARD OF DIRECTORS THE ORIGINAL MEMBERS WERE APPOINTED IN THE FOUNDING DOCUMENTS OF INCORPORATION NEW MEMBERS MAY BE ADDED BY A TWO-THIRDS VOTE OF THE FULL MEMBERS THE BOARD OF DIRECTORS, BY UNANIMOUS ACTION, MAY TERMINATE THE MEMBERSHIP OF ANY MEMBER WHO FAILS TO COMPLY WITH THE BYLAWS OR REGULATIONS

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A		MEMBERS HAVE THE ABILITY TO ELECT OR APPOINT ONE OR MORE MEMBERS OF THE ORGANIZATION'S GOVERNING BODY, THE BOARD OF DIRECTORS THE BY-LAWS GRANT MEMBERS THE POWER TO FILL VACANCIES OR REMOVE EXISTING DIRECTORS BY A MAJORITY VOTE

ldentifier	Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11		A DRAFT COPY OF THE FORM 990 IS ELECTRONICALLY PROVIDED TO THE MEMBERS OF THE BOARD OF DIRECTORS FOR REVIEW PRIOR TO FILING IN ADDITION, A COPY OF THE FORM 990 DRAFT WILL BE AVAILABLE IN A SECURED PART OF THE WEBSITE

Identifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 12C	PERIODIC REVIEW OF COMPENSATION, BENEFITS, AND ANY OUTSIDE SERVICE ARRANGEMENTS AND PROVIDERS

ldentifier	Return Reference	Explanation
	FORM 990, PART VI, SECTION B, LINE 15	THE BOARD INVESTIGATES AND DETERMINES EXECUTIVE DIRECTOR AND PRESIDENT SALARIES AND COMPENSATION THE EXECUTIVE DIRECTOR AND HUMAN RESOURCES DETERMINE ALL OTHERS THE PROCESS INCLUDES COMPARISON TO SIMILAR ORGANIZATIONS AND SALARY SURVEYS AS WELL AS ANALYSIS OF RESPONSIBILITIES AND PERFORMANCE

ldentifier	Return Reference	Explanation	
	FORM 990, PART VI, SECTION C, LINE 19	GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS ARE MADE AVAILABLE UPON REQUEST	

ldentifier	Return Reference	Explanation
CHANGES IN NET ASSETS OR FUND BALANCES	FORM 990, PART XI, LINE 5	NET UNREALIZED GAINS ON INVESTMENTS 157,848

ldentifier	Return Reference	Explanation
	FORM 990, PART XII, LINE 2C	THERE HAS BEEN NO CHANGE IN THE PROCESSES PERFORMED BY THOSE WHO HAVE OVERSIGHT OF THE AUDIT FROM THE PRIOR YEAR